## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

09/70175 FLING DATE

APPLICANT(S)

	· · · · ·						CLAIMS		
	AS F	ILED	AFTER 161 AMENDMENT		AFTER		CLAIMS		*
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				amban is count for		Company of the last	0	LOUMNA	

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\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS